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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF OKLAHOMA	_	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this ar amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:	Abou	: Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Jesse First name D Middle name Jenkins Last name and Suffix (Sr., Jr., II, III)		ame name ame and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Jessie Jenkins		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8748		

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Debtor 1 Jesse D Jenkins Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	9913 Foxfair Hollow Oklahoma City, OK 73130 Number, Street, City, State & ZIP Code Oklahoma County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code
3 .	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case: 17-11909 Doc: 1 Filed: 05/16/17 Page: 3 of 62 Debtor 1 Jesse D Jenkins Case number (if known) Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When District Case number, if known Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ☐ Yes.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

No. Go to line 12.

bankruptcy petition.

Debtor 1 Jesse D Jenkins Case number (if known) Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1 Jesse D Jenkins Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case: 17-11909 Doc: 1 Filed: 05/16/17 Page: 6 of 62 Debtor 1 Jesse D Jenkins Case number (if known) **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jesse D Jenkins Signature of Debtor 2 Jesse D Jenkins

Executed on

MM / DD / YYYY

Signature of Debtor 1

May 15, 2017

Executed on

Case: 17-11909 Filed: 05/16/17 Doc: 1 Page: 7 of 62 Debtor 1 Jesse D Jenkins Case number (if known) For your attorney, if you are I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter represented by one for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the If you are not represented by an attorney, you do not need schedules filed with the petition is incorrect. to file this page. /s/ Warren Alarkon OBA Date May 15, 2017 MM / DD / YYYY Signature of Attorney for Debtor

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Fill	in this information to identify your cas	se:			
	tor 1 Jesse D Jenkins	•			
	First Name	Middle Name	Last Name		
	tor 2 use if, filing) First Name	Middle Name	Last Name		
Uni	ed States Bankruptcy Court for the:	WESTERN DISTRICT OF O	KLAHOMA		
Cas	e number				
(if kn				_	k if this is an nded filing
Ot∙	ioial Form 1060um				
	icial Form 106Sum	nd I iahilities and (Certain Statistical Information		12/15
Be a	s complete and accurate as possible. mation. Fill out all of your schedules original forms, you must fill out a nev	If two married people are first; then complete the int	filing together, both are equally responsible formation on this form. If you are filing amend	or supplyi	ng correct
				Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 1a. Copy line 55, Total real estate, from			\$	150,000.00
	1b. Copy line 62, Total personal proper	rty, from Schedule A/B		\$	21,100.00
	1c. Copy line 63, Total of all property or	n Schedule A/B		\$	171,100.00
Par	2: Summarize Your Liabilities				
					iabilities nt you owe
2.	Schedule D: Creditors Who Have Clain 2a. Copy the total you listed in Column		icial Form 106D) oottom of the last page of Part 1 of <i>Schedule D</i>	\$	166,625.00
3.	Schedule E/F: Creditors Who Have Un. 3a. Copy the total claims from Part 1 (p		m 106E/F) om line 6e of <i>Schedule E/F</i>	\$	3,763.55
	3b. Copy the total claims from Part 2 (r	nonpriority unsecured claims	s) from line 6j of Schedule E/F	\$	28,443.29
			Your total liabilities	\$	198,831.84
Par	3: Summarize Your Income and Ex	xpenses			
4.	Schedule I: Your Income (Official Form Copy your combined monthly income fr			\$	5,861.70
5.	Schedule J: Your Expenses (Official Fo Copy your monthly expenses from line			\$	5,211.10
Par	4: Answer These Questions for Ac	dministrative and Statistica	al Records		
6.	Are you filing for bankruptcy under 0 ☐ No. You have nothing to report on	- · · · · · · · · · · · · · · · · · · ·	this box and submit this form to the court with yo	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?				
			s are those "incurred by an individual primarily for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Jesse D Jenkins Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

8,095.95

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	iim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	3,763.55
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	3,763.55

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	n this information to	o identify y	our case and th	is filing:				
Debt		se D Jenk						
Debt	First N	ame	Middle	Name	Last Name			
	se, if filing) First N	ame	Middle	Name	Last Name			
Jnite	ed States Bankruptcy	Court for t	he: WESTERN	DISTRICT	OF OKLAHOMA			
Case	number							☐ Check if this is an amended filing
								S .
	icial Form 1							
3C	hedule A/	B: Pr	operty					12/15
_	No. Go to Part 2. Yes. Where is the prop	erty?						
.1	0013 Foyfair Hall	OW.			the property? Check all that apply			
	9913 Foxfair Holl Street address, if available		ription	■ Si	the property? Check all that apply ingle-family home uplex or multi-unit building ondominium or cooperative	the amount	of any secure	aims or exemptions. Put d claims on Schedule D: ms Secured by Property.
			ription	■ Si □ Di □ Co	ingle-family home uplex or multi-unit building	the amount Creditors W	of any secure Tho Have Clain	d claims on Schedule D: ns Secured by Property.
_			73130-0000	■ Si □ Di □ Co □ M	ingle-family home uplex or multi-unit building ondominium or cooperative	the amount	of any secure tho Have Clain ue of the	d claims on Schedule D:
-	Street address, if available	, or other descr		Si Si Di Ci	ingle-family home uplex or multi-unit building ondominium or cooperative anufactured or mobile home and vestment property	the amount Creditors W Current val entire prop	of any secure tho Have Clain ue of the	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
-	Street address, if available Oklahoma City	or other descri	73130-0000	Si Si Di Ci	ingle-family home uplex or multi-unit building ondominium or cooperative anufactured or mobile home and	the amount Creditors W Current val entire prop\$15 Describe th	of any secured ho Have Clain use of the serty? 0,000.00 se nature of y	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$150,000.00 our ownership interest
-	Street address, if available Oklahoma City	or other descri	73130-0000	Si Di Ci M La In Ti	ingle-family home uplex or multi-unit building ondominium or cooperative anufactured or mobile home and vestment property meshare	Current val entire prop \$15 Describe th (such as fe	of any secured ho Have Clain use of the serty? 0,000.00 se nature of y	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$150,000.00 our ownership interest
-	Street address, if available Oklahoma City City	or other descri	73130-0000	Si Di Co M La In Ti Oi Who has	ingle-family home uplex or multi-unit building ondominium or cooperative anufactured or mobile home and vestment property meshare ther an interest in the property? Check one ebtor 1 only	Current val entire prop \$15 Describe th (such as fe	of any secured the Have Claim ue of the erty? 0,000.00 ne nature of ye simple, tens	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$150,000.00 our ownership interest
-	Street address, if available Oklahoma City	or other descri	73130-0000	Si Di Co M La In Ti Oi Who hass	ingle-family home uplex or multi-unit building ondominium or cooperative anufactured or mobile home and vestment property meshare ther an interest in the property? Check one ebtor 1 only ebtor 2 only	Current val entire prop \$15 Describe th (such as fe	of any secured the Have Claim ue of the erty? 0,000.00 ne nature of ye simple, tens	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$150,000.00 our ownership interest
-	Oklahoma City City Oklahoma	or other descri	73130-0000	Si Di Ci M La In Ti Oi Who has	ingle-family home uplex or multi-unit building ondominium or cooperative anufactured or mobile home and vestment property meshare ther an interest in the property? Check one ebtor 1 only	Current val entire prop \$15 Describe th (such as fe a life estate	of any secured the Have Claim ue of the erty? 0,000.00 the nature of ye is simple, tense), if known.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$150,000.00
-	Oklahoma City City Oklahoma	or other descri	73130-0000	Si Di Ci M La In Ti Or Who has Do At Other inf	ingle-family home uplex or multi-unit building ondominium or cooperative anufactured or mobile home and vestment property meshare ther an interest in the property? Check one ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only	Current val entire prop \$15 Describe th (such as fe a life estate)	of any secured ho Have Claim ue of the erty? 0,000.00 le nature of y e simple, tense), if known. if this is communications)	current value of the portion you own? \$150,000.00 currownership interest ancy by the entireties, or
_	Oklahoma City City Oklahoma	or other descri	73130-0000	Si Di Ci M La In Ti Or Who has Do At Other inf	ingle-family home uplex or multi-unit building ondominium or cooperative anufactured or mobile home and vestment property meshare ther an interest in the property? Check one ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only t least one of the debtors and another formation you wish to add about this ite	Current val entire prop \$15 Describe th (such as fe a life estate)	of any secured ho Have Claim ue of the erty? 0,000.00 le nature of y e simple, tense), if known. if this is communications)	current value of the portion you own? \$150,000.00 currownership interest ancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debtor 1 Jesse D Jenkins Case number (if known) 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Do not deduct secured claims or exemptions. Put Mazda Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: Cx5 Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2014 Year: Debtor 2 only Current value of the Current value of the 60000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Location: 9913 Foxfair Hollow, \$15,000.00 \$15,000.00 Oklahoma City OK 73130 ☐ Check if this is community property (see instructions) VIN #: JM3KE2CY2E0379458 fair condition Do not deduct secured claims or exemptions. Put Mazda 3.2 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: m6i Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2005 Year: Debtor 2 only Current value of the Current value of the 145000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: lacksquare At least one of the debtors and another Location: 9913 Foxfair Hollow, \$3,500.00 \$3,500.00 Oklahoma City OK 73130 ☐ Check if this is community property (see instructions) below average condition 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$18,500.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Location: 9913 Foxfair Hollow, Oklahoma City OK 73130 bedroom furniture (x3), living room furniture, dining room \$400.00 furniture, 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe.....

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Debtor 1	Jesse D Jer	kins Case number (if known)	own)
		Location: 9913 Foxfair Hollow, Oklahoma City OK 73130	
		tv (x2)	
		ipad	
		cell phone	
		all used*	\$200.00
8 Collecti	ibles of value		
	les: Antiques and	I figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, ons, memorabilia, collectibles	coin, or baseball card collections;
■ No			
☐ Yes.	Describe		
	nent for sports a les: Sports, photo musical instr	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; can	oes and kayaks; carpentry tools;
	Describe		
10. Firear		s, shotguns, ammunition, and related equipment	
■ No	<i>pics.</i> 1 13t013, 11110	s, shotgans, annualiton, and related equipment	
	Describe		
		othes, furs, leather coats, designer wear, shoes, accessories	
□ No			
Yes.	Describe		
		1	
		Location: 9913 Foxfair Hollow, Oklahoma City OK 73130	\$500.00
		male apparel and footwear	
☐ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, ger	ms, gold, silver
		Location: 9913 Foxfair Hollow, Oklahoma City OK 73130	\$1,000.00
		wedding ring band	
Exam ■ No	arm animals ples: Dogs, cats, Describe	birds, horses	
14. Any o t ■ No	ther personal ar	d household items you did not already list, including any health aids you did not lis	st
☐ Yes.	Give specific in	formation	
		of all of your entries from Part 3, including any entries for pages you have attached	\$2,100.00
tor P	art 3. Write that	number here	42,100100
Part 4: De	escribe Your Finar	ncial Assets	
Do you o	wn or have any	egal or equitable interest in any of the following?	Current value of the
			portion you own?
			Do not deduct secured claims or exemptions.
			cianno di chomptiono.

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Debtor 1 Jesse D Jenkins Case number (if known) 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... **USAA Checking account** ending in #5587 \$500.00 Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. $\hfill \square$ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No

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☐ Yes. Give specific information about them...

D	ebtor 1	Jesse D Jenkins	Case number (if known)	
27	Examp ■ No	des, franchises, and other general intangibles of the second of the seco	holdings, liquor licenses, professional licenses	
	□ 165.	Give specific information about them		
M	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax ref ■ No	funds owed to you		
		Give specific information about them, including whether you alread	dy filed the returns and the tax years	
29	Examp ■ No	r support oles: Past due or lump sum alimony, spousal support, child suppor Give specific information	t, maintenance, divorce settlement, property sett	lement
30	Examp	amounts someone owes you bles: Unpaid wages, disability insurance payments, disability benef benefits; unpaid loans you made to someone else	iits, sick pay, vacation pay, workers' compensati	ion, Social Security
	⊔ Yes.	Give specific information		
31	Examp ■ No	sts in insurance policies bles: Health, disability, or life insurance; health savings account (H	SA); credit, homeowner's, or renter's insurance	
	☐ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
32	If you a	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life instance has died.		property because
	■ No □ Yes.	Give specific information		
33		s against third parties, whether or not you have filed a lawsuit bles: Accidents, employment disputes, insurance claims, or rights t		
	_	Describe each claim		
34	Other o	contingent and unliquidated claims of every nature, including	counterclaims of the debtor and rights to set	off claims
	☐ Yes.	Describe each claim		
35	. Any fin ■ No	nancial assets you did not already list		
	☐ Yes.	Give specific information		
36		the dollar value of all of your entries from Part 4, including any art 4. Write that number here		\$500.00
Pa	art 5: De	scribe Any Business-Related Property You Own or Have an Interest In	. List any real estate in Part 1.	
37.	Do you	own or have any legal or equitable interest in any business-related pro	operty?	
	■ No. Go	o to Part 6.		
	☐ Yes. G	Go to line 38.		

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Debtor 1 Jesse D Jenkins Case number (if known)

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$150,000.00
56.	Part 2: Total vehicles, line 5		\$18,500.00		
57.	Part 3: Total personal and household items, line 15		\$2,100.00		
58.	Part 4: Total financial assets, line 36		\$500.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		\$21,100.00	Copy personal property total	\$21,100.00

54. Add the dollar value of all of your entries from Part 7. Write that number here

Official Form 106A/B Schedule A/B: Property page 6

☐ Yes. Give specific information.......

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$0.00

\$171,100.00

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Debtor 1	Jesse D Jenkir	ns		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Case number	ankruptcy Court for the		<u> </u>	
f known)				Charle if this is
i Kilowii)				☐ Check if this is amended filing

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	9913 Foxfair Hollow Oklahoma City, OK 73130 Oklahoma County	\$150,000.00		\$150,000.00	Okla. Stat. tit. 31, §§ 1(A)(1),(2); Okla. Stat. tit. 31, §
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2
	2014 Mazda Cx5 60000 miles Location: 9913 Foxfair Hollow,	\$15,000.00		\$7,500.00	Okla. Stat. tit. 31, § 1(A)(13)
	Oklahoma City OK 73130 VIN #: JM3KE2CY2E0379458 fair condition Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	2005 Mazda m6i 145000 miles Location: 9913 Foxfair Hollow,	\$3,500.00		\$3,500.00	Okla. Stat. tit. 31, § 1(A)(13)
	Oklahoma City OK 73130 below average condition Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
	Location: 9913 Foxfair Hollow, Oklahoma City OK 73130	\$400.00		\$400.00	Okla. Stat. tit. 31, § 1(A)(3)
be fu	bedroom furniture (x3), living room furniture, dining room furniture,			100% of fair market value, up to any applicable statutory limit	

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ebtor 1	Jesse D Jenkins			Case number (if known)		
	f description of the property and line on edule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	cation: 9913 Foxfair Hollow, lahoma City OK 73130	\$200.00		\$200.00	Okla. Stat. tit. 31, § 1(A)(3)	
tv (x2)			100% of fair market value, up to		
ipa				any applicable statutory limit		
	l phone used*					
	e from Schedule A/B: 7.1					
	cation: 9913 Foxfair Hollow,	\$500.00		\$500.00	Okla. Stat. tit. 31, § 1(A)(7)	
	lahoma City OK 73130 le apparel and footwear			100% of fair market value, up to		
	e from Schedule A/B: 11.1		_	any applicable statutory limit		
	cation: 9913 Foxfair Hollow,	\$1,000.00		\$1,000.00	Okla. Stat. tit. 31, § 1(A)(8)	
	lahoma City OK 73130					
	dding ring band e from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit		
	ecking: USAA Checking account ding in #5587	\$500.00		\$500.00	Okla. Stat. tit. 12, § 1171.1; Okla. Stat. tit. 31, § 1(A)(18)	
Line	e from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	/ G (/ /	
	you claiming a homestead exemption bject to adjustment on 4/01/19 and every No			led on or after the date of adjustme	nt.)	
=						
	Yes. Did you acquire the property cover	red by the exemption w	ithin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

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Fill in this information to identify ye	our caso:			
Fill in this information to identify yo	our case:			
Debtor 1 Jesse D Jenki				
First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Name			
United States Bankruptcy Court for th	e: WESTERN DISTRICT OF OKLAHOMA			
Case number				
(if known)			☐ Check	if this is an
			amend	led filing
000 1 1 5 1 100 5				
Official Form 106D				
Schedule D: Creditor	s Who Have Claims Secure	ed by Propert	у	12/15
	e. If two married people are filing together, both are entries, and attach it to this form.			
1. Do any creditors have claims secured	by your property?			
☐ No. Check this box and submi	t this form to the court with your other schedules.	You have nothing else t	o report on this form.	
Yes. Fill in all of the informatio	n below.			
Part 1: List All Secured Claims				
		, Column A	Column B	Column C
	s more than one secured claim, list the creditor separate as a particular claim, list the other creditors in Part 2. As		Value of collateral	Unsecured
much as possible, list the claims in alphab	etical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion
2.1 Approved Caash	Describe the property that secures the claim:	\$1,303.00	\$3,500.00	If any \$0.00
Creditor's Name	2005 Mazda m6i 145000 miles			
	Location: 9913 Foxfair Hollow,			
	Oklahoma City OK 73130			
	below average condition As of the date you file, the claim is: Check all that			
1800 S Air Depot	apply.			
Oklahoma City, OK 73110	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
_	_	oourod		
Debtor 1 only		ecurea		
Debtor 2 only	Chatestan line (asset on the line and hardele line)			
☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Date debt was incurred 6/5/15	Last 4 digits of account number			
2.2 Ditech	Describe the property that secures the claim:	\$145,787.00	\$150,000.00	\$0.00
Creditor's Name	9913 Foxfair Hollow Oklahoma City.	Ψ140,101.00	Ψ100,000.00	Ψ0.00
	OK 73130 Oklahoma County			
Attn: Bankruptcy				
Po Box 6172	As of the date you file, the claim is: Check all that apply.			
Rapid City, SD 57709	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or s	ecured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another				
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				

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Debtor 1 Jesse D Jenkins			Case number (if know)						
	-	First Name	Middle N	ame Last Name		_			
Date	debt v	was incurred	Opened 06/04 Last Active 2/15/17	Last 4 digits of account number	9821				
2.3		lls Fargo D vices	ealer	Describe the property that secures the c	laim:	\$19,535.00	\$15,000.00	\$4,535.00	
		tor's Name		2014 Mazda Cx5 60000 miles Location: 9913 Foxfair Hollow, Oklahoma City OK 73130 VIN #: JM3KE2CY2E0379458 fair condition					
	Po I	n: Bankrup Box 19657	•	As of the date you file, the claim is: Check apply.	k all that				
Irvine, CA 92623 Number, Street, City, State & Zip Code Who owes the debt? Check one.		State & Zip Code	☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.						
■ D	ebtor 1	1 only	песк опе.	☐ An agreement you made (such as mortg car loan)	gage or se	ecured			
		1 and Debtor 2	only otors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit					
□с	heck i	if this claim re unity debt		Other (including a right to offset)					
Date	debt v	was incurred	Opened 07/14 Last Active 2/22/17	Last 4 digits of account number	9355				
Add	d the o	dollar value of	f your entries in C	olumn A on this page. Write that number h	nere:	\$166,625.00	1		
		the last page at number here		the dollar value totals from all pages.		\$166,625.00			
Part	2: L	List Others t	o Be Notified fo	or a Debt That You Already Listed					
trying than	g to co	ollect from yo reditor for any	u for a debt you o	e notified about your bankruptcy for a dek we to someone else, list the creditor in Pa t you listed in Part 1, list the additional cre iis page.	rt 1, and	then list the collection agency	here. Similarly, if yo	ou have more	
		ne, Number, St er & Timbe	reet, City, State & :	Zip Code	On wh	nich line in Part 1 did you enter th	e creditor?		
	_	Box 18486 lahoma Cit	6 y, OK 73154-0	1486	Last 4	digits of account number 182	<u>0</u>		

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	in this infor	mation to identify your o	ase:					
Deb	tor 1	Jesse D Jenkins						
D . I.	O	First Name	Middle Name	Last Nam	е			
	tor 2 use if, filing)	First Name	Middle Name	Last Nam	e			
Unit	ed States Ba	ankruptcy Court for the:	WESTERN DISTRICT	OF OKLAHOMA				
Cas	e number							
(if kno	_						_	if this is an ed filing
Sch Be as any e Schee Schee left. A name	s complete an executory con dule G: Exect dule D: Credi attach the Con e and case nu	m 106E/F E/F: Creditors W d accurate as possible. Use tracts or unexpired leases of the state of the second tors who Have Claims Secundinuation Page to this pagember (if known).	Part 1 for creditors with I hat could result in a claim red Leases (Official Form red by Property. If more s s. If you have no information	PRIORITY claims a . Also list execute 106G). Do not incl pace is needed, co	nd Part 2 fo ory contract ude any cre opy the Part	s on Schedule A/B: P ditors with partially s you need, fill it out, r	roperty (Official For ecured claims that a number the entries in	m 106A/B) and on re listed in the boxes on the
		III of Your PRIORITY Un						
_	_ *	ors have priority unsecured	ciaims against you?					
	□ No. Go to I -	Part 2.						
2. I	identify what ty possible, list th Part 1. If more	r priority unsecured claims /pe of claim it is. If a claim ha- te claims in alphabetical orde than one creditor holds a para- tation of each type of claim, so	s both priority and nonpriority according to the creditor's ticular claim, list the other c	y amounts, list that name. If you have neditors in Part 3.	claim here a nore than two	nd show both priority a	nd nonpriority amount	s. As much as
		•			ŕ	Total claim	Priority amount	Nonpriority amount
2.1		entral Insolvency Ope	ration Last 4 digits o	f account number		\$2,628.55	\$2,628.55	\$0.00
	PO Box	reditor's Name k 21126 elphia, PA 19114	When was the	debt incurred?	2015			
		Street City State Zlp Code	As of the date	you file, the claim	is: Check a	II that apply		
	Who incurre	d the debt? Check one.	☐ Contingent					
	Debtor 1	only	☐ Unliquidate	d				
	Debtor 2	only	☐ Disputed					
	Debtor 1	and Debtor 2 only	•	RITY unsecured cl	aim:			
	☐ At least o	ne of the debtors and anothe	Domestic s	upport obligations				
	_	this claim is for a commun	<u></u>	certain other debts	vou owe the	government		
		subject to offset?		leath or personal in				
	■ No	•	Other. Spe		, ,			

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Debto	or 1 Jesse D Jenkins		Case nur	mber (if know)		
2.2	IRS (Central Insolvency Operation) Priority Creditor's Name	Last 4 digits of account number		\$1,135.00	\$1,135.00	\$0.00
	PO Box 21126	When was the debt incurred?	4/18/17			
	Philadelphia, PA 19114 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all th	nat apply		
,	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	Unliquidated				
	Debtor 2 only	Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the gov	vernment		
	Is the claim subject to offset?	☐ Claims for death or personal inj	_			
	■ No	Other. Specify				
	☐ Yes	. ,				
Part 1	2: List All of Your NONPRIORITY Unsecu	red Claims				
	o any creditors have nonpriority unsecured claim					
_	No. You have nothing to report in this part. Submit		chodulos			
	·	uns form to the court with your other s	oriedules.			
	Yes.					
	ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each cl					
th	nan one creditor holds a particular claim, list the other					
P	art 2.				Tots	al claim
44	Assessment Management Deservings	Last Adiaba af assessment mount	0101		1012	
4.1	Account Management Resources Nonpriority Creditor's Name	Last 4 digits of account numb	er <u>0191</u>	r <u>0191</u>		\$136.00
	Po Box 60607 Oklahoma City, OK 73146	When was the debt incurred?	Opene 5/14/16	d 9/30/15 Last /	Active	
	Number Street City State Zlp Code	As of the date you file, the cla	im is: Check al	ll that apply		
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	ıred claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a s report as priority claims	eparation agree	ement or divorce that y	ou did not	
	■ No	Debts to pension or profit-sh	•			
	Yes	■ Other. Specify Collection	n Attorney	Ou Physicians		

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Debto	or 1 Jesse D Jenkins		Case number (if know)				
4.2	Account Management Resources Nonpriority Creditor's Name	Last 4 digits of account number	1981	\$136.00			
	Po Box 60607 Oklahoma City, OK 73146	When was the debt incurred?	Opened 10/30/15				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured of	claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separa report as priority claims	tion agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts				
	Yes	Other. Specify Collection A	ttorney Ou Physicians				
4.3	Account Management Resources	Last 4 digits of account number	0192	\$136.00			
	Nonpriority Creditor's Name Po Box 60607 Oklahoma City, OK 73146	When was the debt incurred?	Opened 9/30/15				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is:					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured of	claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separa report as priority claims	tion agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	plans, and other similar debts				
	Yes	Other. Specify Collection A	ttorney Ou Physicians				
4.4	Account Management Resources	Last 4 digits of account number	2853	\$136.00			
	Nonpriority Creditor's Name Po Box 60607 Oklahoma City, OK 73146	When was the debt incurred?	Opened 7/27/16				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured of	claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separareport as priority claims	tion agreement or divorce that you did not				
	■ No	\square Debts to pension or profit-sharing	plans, and other similar debts				
	☐ Yes	Other. Specify Ou Physician	18				

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Debt	or 1 Jesse D Jenkins		Case number (if know)					
4.5	Account Management Resources Nonpriority Creditor's Name	Last 4 digits of account number	2852	\$136.00				
	Po Box 60607 Oklahoma City, OK 73146	When was the debt incurred?	Opened 7/27/16					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.	•	,					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts					
	□ Yes	Other. Specify Ou Physici						
4.6	Account Management Resources	Last 4 digits of account number	2131	\$101.00				
	Nonpriority Creditor's Name		Opened 08/14 Last Active					
	Po Box 60607 Oklahoma City, OK 73146	When was the debt incurred?	8/15/15					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only ☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts					
	Yes	Other. Specify Collection	Attorney Ou Physicians					
4.7	Account Management Resources	Last 4 digits of account number	2133	\$81.00				
	Nonpriority Creditor's Name	_		·				
	Po Box 60607 Oklahoma City, OK 73146	When was the debt incurred?	Opened 8/29/14 Last Active 7/15/15					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.	•	,					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	☐ Yes	■ Other. Specify Collection	Attorney Ou Physicians					

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Debto	r 1 Jesse D Jenkins		Case number (if know)					
4.8	Account Management Resources Nonpriority Creditor's Name	Last 4 digits of account number	1978	\$61.00				
	Po Box 60607 Oklahoma City, OK 73146	When was the debt incurred?	Opened 10/30/15 Last Active 4/07/16					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Collection	Attorney Ou Physicians					
4.9	Ace Cash Express inc #2034 Nonpriority Creditor's Name	Last 4 digits of account number		\$477.65				
	824 S Air Depot Blvd Ste A Oklahoma City, OK 73110	When was the debt incurred?	1/2016					
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply					
	Who incurred the debt? Check one.							
	■ Debtor 1 only							
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	·					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	☐ Yes	Other Specific						
		— Other. Specify						
4.1 0	Action Loan Service	Last 4 digits of account number		\$200.00				
	Nonpriority Creditor's Name 723 S Air Depot Oklahoma City, OK 73110	When was the debt incurred?	signature loan					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	□ Debtor 1 and Debtor 2 only □ Disputed							
	· ·	☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	□Yes	Other. Specify						

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Debi	Jesse D Jenkins		Case number (if know)				
4.1 1	Capital One	Last 4 digits of account number	6026	\$450.00			
	Nonpriority Creditor's Name Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 09/14 Last Active 7/28/15				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt		d claim: aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin					
	Yes	Other. Specify Credit Card	<u> </u>				
4.1 2	Cash Express- Southeast	Last 4 digits of account number	8452	\$350.00			
	Nonpriority Creditor's Name 5606 A SE 15th Oklahoma City, OK 73110 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim in	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured Student loans					
	debt Is the claim subject to offset? ■ No	☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin	ration agreement or divorce that you did not				
	■ No □ Yes	Other. Specify	g plans, and other similar debts				
4.1 3	Cashland Holdings LLC #25	Last 4 digits of account number		\$441.64			
	Nonpriority Creditor's Name 1948 S Air Depot Blvd Oklahoma City, OK 73110	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	·					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
		Debts to pension or profit-sharin	a plane, and other similar debte				
	■ No	_	y pians, and other similar debts				
	☐ Yes	Other. Specify					

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Debto	Jesse D Jenkins							
4.1 4	Cbsa	Last 4 digits of account number	9591	\$1,935.00				
	Nonpriority Creditor's Name Attn:Bankruptcy Po Box 1929 Stillwater, OK 74076	When was the debt incurred?	Opened 07/14					
	Number Street City State Zlp Code Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •						
	Debtor 1 only							
	☐ Debtor 2 only							
	☐ Debtor 1 and Debtor 2 only							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts					
	☐ Yes	·	Attorney Southeastern					
		Oklanoma	State Oil					
4.1 5	Check Into Cash MWC	Last 4 digits of account number		\$200.00				
	Nonpriority Creditor's Name 1323 Gateway Plaza Oklahoma City, OK 73110	When was the debt incurred?						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i						
	■ Debtor 1 only □ Contingent							
	☐ Debtor 2 only ☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only ☐ Disputed							
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	\square Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify						
4.1 6	Courtesy Lns	Last 4 digits of account number	7479	\$731.00				
	Nonpriority Creditor's Name 1435 N Key Blvd Midwest City, OK 73110	When was the debt incurred?	Opened 12/30/16 Last Active 2/10/17					
	Midwest City, OK 73110 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	Debtor 1 only	O continue and						
	Debtor 2 only	☐ Contingent						
	<u> </u>	<u> </u>						
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another							
	☐ Check if this claim is for a community	Charles I same						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims						
	■ No	Debts to pension or profit-sharing plans, and other similar debts						
	☐ Yes	Other. Specify Note Loan						
		· • <u></u>						

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Debt	or 1 Jesse D Jenkins		Case number (if know)					
4.1 7	Discover Financial	Last 4 digits of account number	2909	\$2,338.00				
	Nonpriority Creditor's Name Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 01/06 Last Active 2/28/17					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.					
	At least one of the debtors and another	Student loans	a ciaim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts					
	□ Yes	Other. Specify Credit Card						
4.1	Postfolio Possono		2020	¢4 404 00				
8	Portfolio Recovery Nonpriority Creditor's Name	Last 4 digits of account number	<u>2639</u>	\$1,131.00				
	Po Box 41067 Norfolk, VA 23541	When was the debt incurred?	Opened 10/12 Last Active 7/31/14					
	Number Street City State Zlp Code	As of the date you file, the claim						
	Who incurred the debt? Check one.							
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	 Obligations arising out of a sepa report as priority claims 	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	□ Yes	·	Company Account Ge Capital					
4.1 9	Tate & Kirlin Assoc	Last 4 digits of account number	3747	\$1,158.00				
	Nonpriority Creditor's Name 2810 Southhampton Rd Philadelphia, PA 19154	When was the debt incurred?	Opened 12/16					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only ☐ Disputed							
	☐ At least one of the debtors and another							
	☐ Check if this claim is for a community	s claim is for a community						
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	☐ Yes	Other. Specify Inc	Attorney Adt Security Systems					

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Debto	or 1 Jesse D Jenkins		Case number (if know)					
4.2 0	Tinker Fcu	Last 4 digits of account number	0138	\$3,444.00				
	Nonpriority Creditor's Name 4140 West I 40 Oklahoma City, OK 73108	When was the debt incurred?	Opened 02/00 Last Active 7/29/16					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not					
	No	Debts to pension or profit-sharin	g plans, and other similar debts					
	☐ Yes	Other. Specify Credit Card						
4.2	Tinker Fcu	Last 4 digits of account number	0057	\$526.00				
	Nonpriority Creditor's Name		Opened 06/15 Last Active					
	Po Box 45750 Tinker AFB, OK 73145	When was the debt incurred?	3/18/16					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	\square Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims						
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	■ Other. Specify Unsecured						
4.2	Tower Loans Nonpriority Creditor's Name	Last 4 digits of account number	9067	\$781.00				
	1440 Key Blvd Midwest City, OK 73110	When was the debt incurred?	Opened 1/27/17 Last Active 1/27/17					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	□ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts						
	debt							
	Is the claim subject to offset?							
	■ No		g plans, and other similar debts					
	☐ Yes	Other Specify Note Loan						

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Debtor 1 _	Jesse D J	enkins		Case n	number (if kno	w)				
4.2 3 Us	saa Svg B	k	Last 4 digits of account number	4178			\$13,357.00			
At 10			When was the debt incurred?	Opened 02/01 Last Active 1/05/17						
Nu	ımber Street (City State Zlp Code he debt? Check one.	As of the date you file, the claim	is: Check	all that apply					
	Debtor 1 onl	у	☐ Contingent							
	Debtor 2 onl	y	☐ Unliquidated							
	Debtor 1 and	Debtor 2 only	☐ Disputed							
	At least one	of the debtors and another	Type of NONPRIORITY unsecur	ed claim:						
	Check if this	s claim is for a community	☐ Student loans	☐ Student loans						
del		•	☐ Obligations arising out of a separation agreement or divorce that you did not							
Is the claim subject to offset?			report as priority claims							
	No		☐ Debts to pension or profit-shar	01 /	and other simi	ilar debts				
	Yes		Other. Specify Credit Car	d						
is trying to have more notified for lame and A	to collect from the than one coor any debts Address	m you for a debt you owe to sor reditor for any of the debts that in Parts 1 or 2, do not fill out or	pout your bankruptcy, for a debt that neone else, list the original creditor you listed in Parts 1 or 2, list the add submit this page. On which entry in Part 1 or Part 2 did yo	n Parts 1 litional cr	or 2, then list editors here.	t the collection agency he If you do not have addition	ere. Similarly, if you			
	-	/ & Affililiates	ine 4.18 of (<i>Check one</i>):	Part 1:	Creditors with	Priority Unsecured Claims				
		PO Box 41067	1	Part 2:	Creditors with	Nonpriority Unsecured Cla	ims			
,		L	ast 4 digits of account number							
Part 4:	Add the Ar	mounts for Each Type of Un	secured Claim							
Total the		certain types of unsecured clair	ns. This information is for statistical	reporting	purposes or	nly. 28 U.S.C. §159. Add th	ne amounts for each			
						Total Claim				
Tota claims		Domestic support obligations		6a.	\$	0.00				
from Part 1		Taxes and certain other debts	you owe the government	6b.	\$	3,763.55				
	6c.		njury while you were intoxicated	6c.						

				l otal Claim
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	3,763.55
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	3,763.55
				Total Claim
6f.	Student loans	6f.	\$	0.00
6g.	Obligations arising out of a separation agreement or divorce that	0	Φ.	0.00
CI-	you did not report as priority claims	_	·	
			\$	0.00
61.	Other. Add all other nonpriority unsecured claims. Write that amount here.	61.	\$	28,443.29
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	28,443.29
	6b. 6c. 6d. 6e. 6f. 6g. 6h.	 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6a. Domestic support obligations 6a. \$ 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Jesse D Jenkins			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT C	OF OKLAHOMA	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	-
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3			·		
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

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Fill in this	information to identify your	case:			
Debtor 1	Jesse D Jenkins				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	g) First Name	Middle Name	Last Name		
(Spouse II, IIIIII	g) i list Name				
United Stat	es Bankruptcy Court for the:	WESTERN DISTRICT	OF OKLAHOMA		
Case numb	per				
(if known)				☐ Check if this is an	
				amended filing	
Official	Form 106H				
Sched	ule H: Your Cod	ebtors		12/	15
■ No □ Yes 2. With Arizona	nin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3.	lived in a community po Nevada, New Mexico, Pu	r operty state or territor uerto Rico, Texas, Wash	ry? (Community property states and territories include	
in line Form 1 out Co	2 again as a codebtor only if	f that person is a guarar Form 106E/F), or Sched	ntor or cosigner. Make	r if your spouse is filing with you. List the person sl sure you have listed the creditor on Schedule D (O: 06G). Use Schedule D, Schedule E/F, or Schedule G Column 2: The creditor to whom you owe the column schedules that apply:	fficial to fill
3.1				☐ Schedule D, line	
١	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
					
3.2	Name			Schedule D, line	
				☐ Schedule E/F, line	
_				— Scriedule G, IIIIe	
	Number Street City	State	ZIP Code		
,	,		0000		

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Fill	in this information t	to identify your ca	ase:										
Del	btor 1	Jesse D Jen	kins				_						
	btor 2 buse, if filing)						_						
Uni	ited States Bankrup	otcy Court for the	WESTERN DISTRICT	OF OKLAHO	OMA		_						
(If kr	se number									ed filing ent show	ving postpet e following c		oter
<u>O</u>	fficial Form	<u> 1061</u>							MM / DD/	YYYY			
S	chedule I:	Your Inco	ome										12/15
sup spo atta	plying correct infouse. If you are sep ch a separate shee	ormation. If you parated and you	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, an th you, do no	d your spoi ot include i	use i: nforn	s livi natio	ing wit	h you, inc ut your sp	lude info ouse. If	rmation al	oout you e is need	r led,
1.	Fill in your emplinformation.	oyment		Debtor 1					Debtor	2 or non	-filing spo	use	
	If you have more than one job, attach a separate page with information about additional		Francisco de estatua	■ Employed			■ Employed						
			Employment status	☐ Not employed			☐ Not employed						
	employers.		Occupation	Composite Worker			Customer Support Specialist						
	Include part-time, self-employed wo		Employer's name	Department of Defense			PO Box 26750 Oklahoma City, OK 73126						
		ccupation may include student Employer's address r homemaker, if it applies.		Pay Roll-HGA PO Box 998002 Cleveland, OH 44199-8002									
			How long employed th	nere? 1	4 years					14 years	S		-
Pai	rt 2: Give De	tails About Mon	thly Income										
	imate monthly incouse unless you are		ate you file this form. If y	ou have noth	ning to repor	t for a	any I	ine, wr	ite \$0 in the	e space.	Include you	r non-filin	ıg
	ou or your non-filing e space, attach a se		ore than one employer, co	mbine the inf	ormation for	all e	mplo	oyers fo	or that pers	on on the	e lines belov	w. If you r	need
								For D	ebtor 1		Debtor 2 or filing spou		
2.			ry, and commissions (becalculate what the monthly			2.	\$		7,216.00	\$	1,379	.00	
3.	Estimate and list	t monthly overti	me pay.			3.	+\$		0.00	+\$_	0	.00	

7,216.00

1,379.00

4. Calculate gross Income. Add line 2 + line 3.

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Debt	or 1	Jesse D Jenkins	-	C	Case numbe	er (if knov	n)				
	Cor	by line 4 here	4.		For Debt	or 1 7,216.0	10		Debtor -filing s 1,		
_	·				·	,	<u> </u>	· —	,		=
5.	5a.	all payroll deductions: Tax, Medicare, and Social Security deductions	5a		\$	1 701 5		Ф		344.05	
	5a. 5b.	Mandatory contributions for retirement plans	5b		\$	1,791.5 0.0	_	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	50		\$	0.0		\$_		0.00	_
	5d.	Required repayments of retirement fund loans	50		\$	0.0	_	\$		0.00	_
	5e.	Insurance	5e	€.	\$	597.6	7	\$		0.00	=
	5f.	Domestic support obligations	5f.		\$	0.0	0	\$		0.00	_
	5g.	Union dues	5g		\$	0.0	_	\$		0.00	_
	5h.	Other deductions. Specify:	_ 5h _	1.+	\$	0.0	0 +	· \$		0.00	-
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	2,389.2	25	\$		344.05	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	4,826.7	<u>′5</u>	\$	1,	034.95	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a	a .	\$	0.0	0	\$		0.00	
	8b.	Interest and dividends	8b).	\$	0.0	0	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	2 .	\$	0.0	10	\$		0.00	
	8d.		80		\$	0.0	_	\$		0.00	_
	8e.	Social Security	86	€.	\$	0.0	_	\$		0.00	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e 8f. 8g		\$ \$	0.0		\$		0.00	_
	8h.		_		\$		0 +			0.00	_
		Other monthly income. Specify:	_	_	<u> </u>					0.00	- -
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	0.0	0	\$		0.0	0
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	4,826	6.75 +	\$	1.0	34.95	= \$	5,861.70
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,-						-,
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not exify:	depe						chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certainlies							12.	\$	5,861.70
13.	Do	you expect an increase or decrease within the year after you file this form	?								y income
		No. Yes. Explain:									

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Fill	in this information to identify you	r case:					
Deb	otor 1 Jesse D Jenki	ns			Che	eck if this is:	
Dah						An amended filing	
	ouse, if filing)					13 expenses as of	wing postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the:	WESTERN DIS	STRICT OF OKLAH	IOMA		MM / DD / YYYY	
	se number nown)						
O.	fficial Form 106J						
	chedule J: Your E	_ xpenses					12/15
Be info	as complete and accurate as pormation. If more space is need mber (if known). Answer every	ossible. If two ded, attach ano	married people ar				
Par 1.	t 1: Describe Your Househords this a joint case?	old					
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in	a senarate hou	isehold?				
	□ No □ Yes. Debtor 2 must t	-		for Separate Housel	nold of De	btor 2.	
2.	Do you have dependents? [□ No					
	De ant Pat Dahtan 4 and	■ Yes Fill out	this information for ependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.			Son		12	Yes
				Son		16	□ No ■ Yes
							■ res
							☐ Yes
							□ No
_							☐ Yes
3.	Do your expenses include expenses of people other tha	n No					
	yourself and your dependent						
Par	t 2: Estimate Your Ongoing	1 Monthly Expe	nses				
Est exp	timate your expenses as of you benses as of a date after the bablicable date.	ır bankruptcy fi	ling date unless y				
the	lude expenses paid for with no value of such assistance and ficial Form 106l.)	n-cash govern have included	ment assistance it it on <i>Schedule I:</i> Y	f you know Your Income		Your exp	enses
(•.							
4.	The rental or home ownershi payments and any rent for the		your residence. In	nclude first mortgage	4.	\$	1,162.00
	If not included in line 4:						
	4a. Real estate taxes				4a.	\$	0.00
	4b. Property, homeowner's,				4b.	\$	0.00
	4c. Home maintenance, repa		•		4c.	·	100.00
5.	4d. Homeowner's association Additional mortgage paymen			me equity loans	4d. 5.	\$ \$	0.00

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Debtor 1	Jesse D Jenkins	Case num	ber (if known)	
6. Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	200.00
6b.	Water, sewer, garbage collection	6b.	\$	80.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	210.00
6d.	Other. Specify:	6d.	\$	0.00
. Foo	d and housekeeping supplies	7.	\$	1,509.00
	Idcare and children's education costs	8.	\$	52.10
. Clo	thing, laundry, and dry cleaning	9.	\$	30.00
	sonal care products and services	10.	·	30.00
	dical and dental expenses	11.		150.00
	nsportation. Include gas, maintenance, bus or train fare.		*	
	not include car payments.	12.	\$	400.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	ritable contributions and religious donations	14.	\$	0.00
5. Ins ı	urance.			
Doı	not include insurance deducted from your pay or included in lines 4 or 20.			
15a	. Life insurance	15a.	\$	0.00
15b	. Health insurance	15b.	\$	0.00
15c	. Vehicle insurance	15c.	\$	180.00
15d	. Other insurance. Specify:	15d.	\$	0.00
6. Tax	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	cify:	16.	\$	0.00
	allment or lease payments:			
17a	. Car payments for Vehicle 1	17a.	\$	508.00
17b	. Car payments for Vehicle 2	17b.	\$	0.00
17c	. Other. Specify:	17c.	\$	0.00
17d	. Other. Specify:	17d.	\$	0.00
8. Yo u	ir payments of alimony, maintenance, and support that you did not report as			
ded	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spe	cify:	19.		_
	er real property expenses not included in lines 4 or 5 of this form or on Scho			
20a	. Mortgages on other property	20a.	·	0.00
20b	. Real estate taxes	20b.	\$	0.00
20c	. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d	. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e	. Homeowner's association or condominium dues	20e.	\$	0.00
1. O th	er: Specify: Non filing spouse separate debt	21.	+\$	500.00
2 Cal	culate your monthly expenses			
	. Add lines 4 through 21.		\$	5,211.10
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	3,211.10
			· .	F 044 40
22c	. Add line 22a and 22b. The result is your monthly expenses.		\$	5,211.10
3. Cal	culate your monthly net income.			
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,861.70
	. Copy your monthly expenses from line 22c above.	23b.	·	5,211.10
		_00.	·	3,211110
23c	. Subtract your monthly expenses from your monthly income.			
	The result is your <i>monthly net income</i> .	23c.	\$	650.60
For	you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect you ification to the terms of your mortgage?			e or decrease because of a

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Fill in this infor	mation to identify your	case:			
Debtor 1	Jesse D Jenkins				
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle News	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT	OF OKLAHOMA		
Case number (if known)					Check if this is an amended filing
Official Ford Declarate		n Individual	Debtor's Sch	nedules	12/15
f two married p	eople are filing together	, both are equally respo	nsible for supplying corre	ect information.	
	!- ((la la audinion (accepta de la	d - d b - d - d 1	Maldon a falsa atatamant a	
obtaining mone		n connection with a ban		Making a false statement, co fines up to \$250,000, or imp	
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes.	Name of person				etition Preparer's Notice, nature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	nmary and schedules filed	with this declaration and	
X /s/.les	sse D Jenkins		X		
Jesse	D Jenkins ure of Debtor 1		Signature of D	Pebtor 2	
Date _	May 15, 2017		Date		

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Fill in	this inform	ation to identify you	r case:			
Debto		Jesse D Jenkins				
200		First Name	Middle Name	Last Name		
Debto	or 2 e if, filing)	First Name	Middle Name	Last Name		
Unite	d States Ban	kruptcy Court for the:	WESTERN DISTRICT O	F OKLAHOMA		
Case (if know	number					check if this is an mended filing
	cial For tement		Affairs for Indivi	duals Filing for B	ankruptcy	4/10
inforn	nation. If mo er (if known	ore space is needed,). Answer every que	attach a separate sheet to	this form. On the top of any	equally responsible for sup y additional pages, write you	
		current marital statu		2 21704 201010		
	■ Married □ Not marr	ied				
2. C	ouring the la	st 3 years, have you	lived anywhere other than	where you live now?		
•	■ No □ Yes. List	all of the places you I	ived in the last 3 years. Do n	ot include where you live now	ı.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Mal	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	2 Explain	the Sources of You	r Income			
F	ill in the total	amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$15,765.12	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Debtor 1 Jesse D Jenkins Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$57,390.51 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$89,044.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source (before deductions Describe below. (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... still owe paid **Wells Fargo Dealer Services** 1/2017, 2/2017, \$1,524.00 \$19,535.00 ☐ Mortgage Attn: Bankruptcy 3/2017 ■ Car Po Box 19657 (\$508/month) ☐ Credit Card Irvine, CA 92623 ☐ Loan Repayment ☐ Suppliers or vendors

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□ Other

Debtor 1 Jesse D Jenkins Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Total amount Amount you Reason for this payment Dates of payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ☐ Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address:

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Debtor 1 Jesse D Jenkins Case number (if known) 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? \square No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. 3/25/17: \$2,400.00 \$2400 dollar claim approximately Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Stevenson-Kim Alarkon PLLC **Attorney Fees** 3/28/17 \$1,400.00 1415 NW 43rd St Oklahoma City, OK 73118 warren@alarkonlaw.com; info@skafirm.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was **Address** property transferred payments received or debts made paid in exchange Person's relationship to you

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

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Del	ebtor 1 Jesse D Jenkins		Case number (if known)										
	beneficiary? (These are often called asset-protection devices.) ■ No □ Yes. Fill in the details.												
	Name of trust		Description and	value of the pro	operty tran	sferred	Date Transfer was made						
Pai	rt 8: List of Certain Financia	l Accounts, Inst	ruments, Safe Deposi	t Boxes, and S	Storage Uni	ts							
20.	Within 1 year before you filed sold, moved, or transferred? Include checking, savings, m houses, pension funds, coop No Yes. Fill in the details.	oney market, or	other financial accou	nts; certificate	s of depos	•	,						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing o transfe						
21.	Do you now have, or did you cash, or other valuables? No Yes. Fill in the details.	have within 1 ye	ar before you filed fo	r bankruptcy, a	any safe de	posit box or other depo	sitory for securities,						
	Name of Financial Institution Address (Number, Street, City, Star	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)			Describe	the contents	Do you still have it?						
22.	Have you stored property in a No Yes. Fill in the details.	a storage unit or	place other than you	r home within	1 year befo	ore you filed for bankrup	tcy?						
	Name of Storage Facility Address (Number, Street, City, Star	te and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?						
Pai	rt 9: Identify Property You H	old or Control fo	or Someone Else										
23.	Do you hold or control any profor someone.	roperty that som	eone else owns? Incl	ude any prope	rty you bor	rrowed from, are storing	for, or hold in trust						
	■ No □ Yes. Fill in the details.												
	Owner's Name Address (Number, Street, City, Star	te and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value						

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Jesse D Jenkins	Case number (if known)
--------------------------	------------------------

24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No												
	Yes. Fill in the details.												
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice									
25.	Have you notified any governmental unit of any	y release of hazardous material?											
	NoYes. Fill in the details.												
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice									
26.	Have you been a party in any judicial or admin	istrative proceeding under any envi	ronmental law? Include settlements a	and orders.									
	■ No □ Yes. Fill in the details.												
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case									
Par	11: Give Details About Your Business or Co	nnections to Any Business											
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have an	y of the following connections to any	/ business?									
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time												
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)												
	☐ A partner in a partnership												
	☐ An officer, director, or managing executive of a corporation												
	☐ An owner of at least 5% of the voting or equity securities of a corporation												
	■ No. None of the above applies. Go to Part	No. None of the above applies. Go to Part 12.											
	☐ Yes. Check all that apply above and fill in	the details below for each business	3.										
	Business Name D Address	escribe the nature of the business	Employer Identification number Do not include Social Security										
		ame of accountant or bookkeeper	Dates business existed	number of Trine.									
	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.												
	■ No □ Yes. Fill in the details below.												
	Name Address (Number, Street, City, State and ZIP Code)												

Debtor 1 Jesse D Jenkins Case number (if known) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jesse D Jenkins Signature of Debtor 2 Jesse D Jenkins Signature of Debtor 1 Date May 15, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

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Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:									
Debtor 1	Jesse D Jenkins								
Debtor 2 (Spouse, if filing)									
United States Bankruptcy Court for the: Western District of Oklahoma									
Case number (if known)									

Check as directed in lines 17 and 21:									
According to the calculations required by this Statement:									
1. Disposable income is not determined un11 U.S.C. § 1325(b)(3).									
 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). 									
☐ 3. The commitment period is 3 years.									
4. The commitment period is 5 years.									
☐ Check if this is an amended filing									

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Colun Debto		Debt	mn B or 2 or filing spouse
Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and co	ommissio	ons (before all	\$	7,216.61	\$	1,379.34
Alimony and maintenance payments. Do not include Column B is filled in.	payme	ents from	a spouse if	\$	0.00	\$	0.00
All amounts from any source which are regularly p of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm	t. Includ d, your	le regular depende only if Col	contributions nts, parents,	\$	0.00	\$	0.00
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	- \$	0.00					
Net monthly income from a business, profession, or far	rm \$ _	0.00	Copy here ->	\$	0.00	\$	0.00
Net income from rental and other real property	Debtor	1					
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	- \$ _	0.00					
Net monthly income from rental or other real property	•	0.00	Copy here ->	\$	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Case number (if known)

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. \$ 0.00 \$ 0.00 Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. \$ 7,216.61 + \$ 1,379.34 \$ 8,595.95 Total average monthly income from line 11. \$ 8,595.95 Total average monthly income from line 11. \$ 8,595.95 Total average monthly income from line 11. You are not married. Fill in 0 below. You are married and your spouse is filling with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse axt liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse axt liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's axt liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. **Someone other than you or your dependents. \$ 500.00 \$ 50.00 \$ 50.00 **Someone other than you or your dependents. \$ 8,095.95 Multiply line 15 aby 12 (the number of months in a year). **Source and monthly income that such as a year of the form. **Source and monthly income to the year for this part of the	9.	Do not the S Fo Fo Pens bene	est, dividends, and royalties Inployment compensation In the amount if you contend that the amount received was a beneficial Security Act. Instead, list it here: In you \$ 0.0 In your spouse \$ 0.	00 00 s a	Column A Debtor 1 \$ \$	0.00	Column B Debtor 2 non-filling \$ \$	or	
Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: 14. You are not married. Fill in 0 below. 15. Total average monthly income filling with you. 16. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. 16. Below, specify the basis for exclusion is income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. 16. If this adjustment does not apply, enter 0 below. 17. Total 18. \$500.00 \$ \$500.00 \$ \$ \$0.00 \$ \$ \$0.00 \$ \$ \$0.00 \$ \$ \$0.00 \$ \$ \$ \$0.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		Do no recei dome	ot include any benefits received under the Social Security Act or payment ved as a victim of a war crime, a crime against humanity, or international estic terrorism. If necessary, list other sources on a separate page and pu	ts or	\$	0.00	\$	0.00	
Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. non filling spouse separate debt \$ 500.00 Total \$ 500.00 S \$ 3,095.95 Total \$ \$ 3,095.95 S \$ 3,095.95 S \$ 3,095.95 S \$ 3,095.95 S \$ 3,095.95 X 12 S \$ 27454.46 S \$ 27454.46					\$	0.00	\$	0.00	
each column. Then add the Total for Column A to the total for Column B. \$ 7,216.61			Total amounts from separate pages, if any.	+	\$		\$		
Part 2: Determine How to Measure Your Deductions from Income 12. Copy your total average monthly income from line 11. \$8,595.95 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. non filing spouse separate debt	11.			\$	7,216.61	+ \$ _	1,379.34		
13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. non filing spouse separate debt	Part	2:	Determine How to Measure Your Deductions from Income						
You are married and your spouse is filing with you. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. non filling spouse separate debt \$ 500.00 \$ Total \$ 500.00 Copy here=> - 500.00 \$ 8,095.95 Total 14. Your current monthly income. Subtract line 13 from line 12. \$ 8,095.95 Multiply line 15a by 12 (the number of months in a year).	12. 13.	Calc	ulate the marital adjustment. Check one:					\$	8,595.95
You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. non filling spouse separate debt \$ 500.00 \$ Total \$ 500.00 Copy here=> - 500.00 \$ 8,095.95 Total 14. Your current monthly income. Subtract line 13 from line 12. \$ 8,095.95 Multiply line 14 here=> \$ 8,095.95 Multiply line 15a by 12 (the number of months in a year).									
Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. non filling spouse separate debt Total Solution Solution Solution Copy here=> - 500.00 14. Your current monthly income. Subtract line 13 from line 12. Solution So			, ,						
non filing spouse separate debt Total Total S 500.00 S Total Copy here=> S 8,095.95 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). x 12			Fill in the amount of the income listed in line 11, Column B, that was NOT dependents, such as payment of the spouse's tax liability or the spouse's Below, specify the basis for excluding this income and the amount of th	suppor	rt of someon	e other th	nan you or yo	ur depend	ents.
Total \$ 500.00 Copy here=> - 500.00 14. Your current monthly income. Subtract line 13 from line 12. \$ 8,095.95 15a. Copy line 14 here=> \$ 8,095.95 Multiply line 15a by 12 (the number of months in a year).			, , , , , , , , , , , , , , , , , , , ,	•	500.0	n			
Total \$ 500.00 Copy here=> - 500.00 14. Your current monthly income. Subtract line 13 from line 12. \$ 8,095.95 15a. Copy line 14 here=> \$ 8,095.95 Multiply line 15a by 12 (the number of months in a year).			non ming spouse separate dest		300.0	_			
Total \$ 500.00 Copy here=> - 500.00 14. Your current monthly income. Subtract line 13 from line 12. \$ 8,095.95 15a. Copy line 14 here=> \$ 8,095.95 Multiply line 15a by 12 (the number of months in a year).				· · —		_			
15. Calculate your current monthly income for the year. Follow these steps: 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). x 12			Total		500.0	0c	opy here=>		500.00
15a. Copy line 14 here=> \$ 8,095.95 Multiply line 15a by 12 (the number of months in a year).	14.	Υοι	r current monthly income. Subtract line 13 from line 12.					\$	8,095.95
Multiply line 15a by 12 (the number of months in a year).	15.		Conviling 14 horo-s					\$	8,095.95
2 07.454.40		. 54						· —	12
		15b	. The result is your current monthly income for the year for this part of the	ne form.					

Debtor 1 Jesse D Jenkins

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Case number (if known)

16.	Calcula	te the median family income that applies to	you. Follow these steps:		
	16a. Fill	in the state in which you live.	OK		
	16b. Fill	in the number of people in your household.	4		
	16c. Fill	in the median family income for your state and	size of household.	\$	69,061.00
	ins	find a list of applicable median income amour tructions for this form. This list may also be av		parate	
		the lines compare?			
	17a.	☐ Line 15b is less than or equal to line 16c. 11 U.S.C. § 1325(b)(3). Go to Part 3. Do	On the top of page 1 of this form, check box 1 NOT fill out <i>Calculation of Your Disposable In</i>		
	17b.		of page 1 of this form, check box 2, <i>Disposal</i> culation of Your Disposable Income (Official above.		
Part :	3: 0	Calculate Your Commitment Period Under 1	I U.S.C. § 1325(b)(4)		
18.	Сору ус	our total average monthly income from line	11	\$	8,595.95
	contend	the marital adjustment if it applies. If you a lithat calculating the commitment period under s income, copy the amount from line 13.			
	•	he marital adjustment does not apply, fill in 0 c	ı line 19a.	-\$	500.00
	19b. Su	btract line 19a from line 18.		\$_	8,095.95
		te your current monthly income for the yea	·	•	8,095.95
				\$	
	Mu	Iltiply by 12 (the number of months in a year).		Г	x 12
	20h Th	e result is your current monthly income for the	vear for this part of the form	\$	97,151.40
·	200. 111	o recent to your content mentally meeting for the	your for the part of the form	Ľ	
	20c. Co	py the median family income for your state an	size of household from line 16c	\$	69,061.00
				L	
	21. Ho	w do the lines compare?			
		Line 20b is less than line 20c. Unless other period is 3 years. Go to Part 4.	vise ordered by the court, on the top of page 1	of this form, check box 3,	, The commitmen
		Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.	nless otherwise ordered by the court, on the t	top of page 1 of this form,	check box 4, The
Part 4	4: S	Sign Below			
	By signi	ng here, under penalty of perjury I declare tha	the information on this statement and in any a	attachments is true and co	orrect.
X	/s/ Je	sse D Jenkins			
-	Jesse	D Jenkins			
	-	ure of Debtor 1 lay 15, 2017			
1		IM / DD / YYYY			
	If you ch	necked 17a, do NOT fill out or file Form 122C-	<u>.</u>		
	If you ch	necked 17b, fill out Form 122C-2 and file it with	this form. On line 39 of that form, copy your c	current monthly income fro	m line 14 above.

Jesse D Jenkins

Debtor 1

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Fill in	this info	ormation t	to identif	y your	case:																
Debto	r 1	Jesse [) Jenkir	าร						_											
Debto	r 2 se, if filin	g)								_											
United	States I	Bankruptcy	/ Court fo	r the:	Westerr	District	of Okla	ahoma		_											
Case i	number wn)									_				□ Che	eck if	this is	an a	mende	d fili	ng	
	Pter	^{22C-2} 13 Ca	lcula	ition	of Y	our l	Disp	oos	able	ı In	cor	me								(04/16
		form, you Period (Off				ed copy	of Cha	apter 1	13 State	emer	nt of Y	Your C	urren	Mont	hly In	come a	and C	alculat	ion o	f	
space	is neede	e and acc ed, attach es, write y	a separa	te shee	et to this	form, In	nclude	the lir													re
Part 1	Ca	Iculate Yo	our Dedu	ctions	from Yo	ur Incon	ne														
the info	question rmation	I Revenue ns in lines may also expense ar they are hi	be avail	find the able at eat out in	ne IRS s the ban lines 6-	tandards kruptcy 15 regard	s, go o clerk's dless of	online of office of your a	using t e. actual e	he li ı exper	n k sp o nse. In	ecified	in the	sepa f the fo	rate ii	ou will u	ions f	for this ome of y	form	n. This actual	S
		d do not de															# III IIII	es o an	iu 6 0	n Foiii	11
If yo	our expe	nses differ	from moi	nth to m	onth, en	ter the av	verage	expen	ise.												
Not	e: Line n	umbers 1-	4 are not	used in	this forr	n. These	numbe	ers app	oly to in	forma	ation r	require	d by a	simila	r form	used ir	n chap	oter 7 ca	ases.		
5.	The nu	mber of p	eople us	ed in d	letermin	ing your	deduc	ctions	from i	ncon	ne										
	plus the	ne number e number o nber of peo	of any ad	ditional	depende												4				
Nat	ional Sta	andards	Υ	ou mus	st use the	e IRS Na	tional S	Standa	rds to a	answe	er the	questic	ons in	lines 6	s-7.						
6.		clothing, a rds, fill in t								ered	in line	5 and	the IR	S Nati	onal		\$_		1	,650.	00
7.	the doll people	pocket he ar amount who are 6 than this IF	for out-o 5 or olde	f-pocke ·becaı	t health ise oldei	care. The people I	e numb have a	er of p higher	eople is RS al	s spli Iowai	t into t nce fo	two cat	egorie	speo	ple wh	ho are ι	under	65 and			

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Debtor 1		lesse D Jenkins				Case number (ri	r known,				
Peo	ple v	who are under 65 years of age									
	7a.	Out-of-pocket health care allowance per person	\$	49							
	7b.	Number of people who are under 65	X	4							
	7c.	Subtotal. Multiply line 7a by line 7b.	\$	196.00		Copy here=	:> \$	1	96.00		
Peo	ple v	who are 65 years of age or older									
	7d.	Out-of-pocket health care allowance per person	\$	117							
	7e.	Number of people who are 65 or older	Χ	0							
	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00		Copy here=	:> \$		0.00		
	7g.	Total. Add line 7c and line 7f			\$	196.00		Copy tot	al here=>	\$	196.00
Loc	al St	andards You must use the IRS Local Standards to	answe	r the questic	ns in lin	es 8-15.					
		n information from the IRS, the U.S. Trustee Progretcy purposes into two parts:	ram ha	s divided th	e IRS L	ocal Standar	d for	housing	g for		
■ F	lous	ing and utilities - Insurance and operating expens	es								
■ H	lous	ing and utilities - Mortgage or rent expenses									
	arate Hou	rer the questions in lines 8-9, use the U.S. Trustee instructions for this form. This chart may also be using and utilities - Insurance and operating expense the dollar amount listed for your county for insurance a	e availa nses: U	ble at the b Ising the nui	ankrupt mber of p	cy clerk's of	fice.	•		pecified i	n the 606.00
9.	Ηοι	using and utilities - Mortgage or rent expenses:									
	9a.	Using the number of people you entered in line 5, fil listed for your county for mortgage or rent expenses		dollar amou	nt		\$	1,2	03.00		
	9b.	Total average monthly payment for all mortgages ar	nd other	debts secu	red by y	our home.					
		To calculate the total average monthly payment, add contractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.									
		Name of the creditor		verage mor ayment	nthly						
		Ditech	\$	1,1	62.00						
						Сору				Donoat ti	nis amount
		9b. Total average monthly payment	\$	1,1	62.00	here=>	-\$_	1,		on line 3	
	9c.	Net mortgage or rent expense.							_		
		Subtract line 9b (total average monthly payment) fro or rent expense). If this number is less than \$0, enter		9a (mortgag	e	\$		41.00	Copy here=>	\$	41.00
10.		ou claim that the U.S. Trustee Program's division ects the calculation of your monthly expenses, fill					is inc	orrect a	nd	\$	0.00
	Ex	plain why:									

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Case number (if known)

11.	Local transportation expenses: Check the number of vehic	cles for which you claim	an ownership or operating expense.
	☐ 0. Go to line 14.		
	☐ 1. Go to line 12.		
	2 or more. Go to line 12.		
12.	Vehicle operation expense: Using the IRS Local Standards operating expenses, fill in the <i>Operating Costs</i> that apply for		
13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.		
Ve	hicle 1 Describe Vehicle 1: 2014 Mazda Cx5 60000 Oklahoma City OK 731 condition		· · · · · · · · · · · · · · · · · · ·
13a	. Ownership or leasing costs using IRS Local Standard		\$ 485.00
13b	. Average monthly payment for all debts secured by Vehicle 1 Do not include costs for leased vehicles.		
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mon bankruptcy. Then divide by 60.		at
	Name of each creditor for Vehicle 1	Average monthly payment	
	Wells Fargo Dealer Services	\$\$	
	Total Average Monthly Payment	\$380.25	Copy here => -\$ 380.25 Repeat this amount on line 33b.
13c	. Net Vehicle 1 ownership or lease expense		Copy net Vehicle 1
	Subtract line 13b from line 13a. if this number is less than \$0), enter \$0	\$ 104.75 verticle 1 expense here
Ve	hicle 2 Describe Vehicle 2: 2005 Mazda m6i 14500 Oklahoma City OK 731		
13d	. Ownership or leasing costs using IRS Local Standard		\$ 485.00
13e	. Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	. Do not include costs for	r
	Name of each creditor for Vehicle 2	Average monthly payment	
	Approved Caash	\$\$	
	Total average monthly payment	\$24.50	Copy Repeat this amount on line 33c.
13f.	Net Vehicle 2 ownership or lease expense		Copy net Vehicle 2
	Subtract line 13e from line 13d. if this number is less than \$0), enter \$0	*** \$ 460.50 expense here
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of		
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Trans</i>	what you believe is the ap	

Debtor 1 Jesse D Jenkins

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Case number (if known)

Oth	er Nece	essary Expenses	In addition to the expense the following IRS categori			ns listed above,	you are allowed your monthly expenses	for	
16.	self-en	nployment taxes, soc ay for these taxes. H	cial security taxes, and Med	lica cei	are taxe ve a ta	es. You may inc x refund, you m	d local taxes, such as income taxes, lude the monthly amount withheld from ust divide the expected refund by 12 for taxes.		
	Do not	include real estate,	sales, or use taxes.			, ,		\$	1,645.17
17.		ntary deductions: 7	The total monthly payroll de and uniform costs.	du	ctions	that your job red	quires, such as retirement		
	Do not	include amounts tha	at are not required by your j	job	, such	as voluntary 40	1(k) contributions or payroll savings.	\$_	0.00
18.	filing to Do not	ogether, include payr	ments that you make for your life insurance on your de	ur	spouse	's term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	0.00
19			: The total monthly amount	tha	at vou r	nav as required	by the order of a court or	· —	
	admini	strative agency, suc	h as spousal or child suppo	rt	payme	nts.		•	0.00
	Do not	include payments o	n past due obligations for s	ро	usal or	child support.	ou will list these obligations in line 35.	\$_	0.00
20.			thly amount that you pay for	r ed	ducatio	n that is either r	required:		
		a condition for your jour							0.00
	■ for	your physically or me	entally challenged depende	nt	child if	no public educa	ation is available for similar services.	\$_	0.00
21.			nly amount that you pay for or any elementary or secon				itting, daycare, nursery, and preschool.	\$	0.00
22.							amount that you pay for health care		
			Ith and welfare of you or you nt. Include only the amount				s not reimbursed by insurance or paid		
	•	•	ince or health savings acco					\$	0.00
23.	for you phone income	and your dependen service, to the exten e, if it is not reimburs	nts, such as pagers, call wa nt necessary for your health eed by your employer.	itin ar	g, calle nd welfa	er identification, are or that of yo	you pay for telecommunication services special long distance, or business cell ur dependents or for the production of vice. Do not include self-employment		0.00
	expen	ses, such as those re	eported on line 5 of Official	Fo	rm 122	C-1, or any am	ount you previously deducted.	+\$_	0.00
24.		II of the expenses a nes 6 through 23.	allowed under the IRS exp	en	se allo	owances.		\$	5,133.42
Add	litional	Expense Deduction							
			Note: Do not include						
25.	insura						ses. The monthly expenses for health ly necessary for yourself, your spouse, o	r	
	Health	insurance			\$	110.24			
	Disabi	lity insurance			\$	0.00			
	Health	savings account		+	\$	0.00	_		
	Total				\$_	110.24	Copy total here=>	\$	110.24
	Do you	u actually spend this No. How much do					1		
	_	Yes	, ou dotadily opoliu:		\$				
26.	Contin		to the care of household	٥r		members The	actual monthly expenses that you will		
۷٥.	continu	ue to pay for the reas ousehold or member	sonable and necessary care	e a	nd sup is una	port of an elder able to pay for s	ly, chronically ill, or disabled member of uch expenses. These expenses may	\$	0.00
27.	Protec	ction against family	violence. The reasonably	ne	cessar	y monthly expe	nses that you incur to maintain the es Act or other federal laws that apply.	_	
		•	p the nature of these expen				os not of other rederal laws that apply.	\$	0.00
	Dy IaW	, and count must keep	p are nature or these expen	.00	o con	aoritiai.		-	

Debtor 1 Jesse D Jenkins

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ebtor 1	Jesse D Jenkins	Case nu	umber (if known)				
28.	Additional home energy costs. Your hom line 8.	ne energy costs are included in your insurance ar	nd operating	expense	es on		
	If you believe that you have home energy of 8, then fill in the excess amount of home en	osts that are more than the home energy costs in ergy costs	ncluded in ex	penses	on line)	
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must sho ary.	w that the ad	ditional		\$	0.00
		Iren who are younger than 18. The monthly expendent children who are younger than 18 years					
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must exp not already accounted for in lines 6-23.	lain why the	amount			
	* Subject to adjustment on 4/01/19, and evo	ery 3 years after that for cases begun on or after	the date of a	djustme	nt.	\$	300.00
		he monthly amount by which your actual food an g allowances in the IRS National Standards. That s in the IRS National Standards.					
		ional allowance, go online using the link specifie so be available at the bankruptcy clerk's office.	d in the sepa	rate			
	You must show that the additional amount	claimed is reasonable and necessary.				\$	57.00
	Continuing charitable contributions. The instruments to a religious or charitable organization	e amount that you will continue to contribute in thanization. 11 U.S.C. § 548(d)(3) and (4).	e form of cas	h or fina	incial		
	Do not include any amount more than 15%	of your gross monthly income.				\$	0.00
	Add all of the additional expense deducted Add lines 25 through 31.	tions.				\$_	467.24
Ded	uctions for Debt Payment						
I	oans, and other secured debt, fill in lines	in property that you own, including home mo 33a through 33e. ent, add all amounts that are contractually due to					
	creditor in the 60 months after you file for ba		o dadir dodar.	, u			
	Mortgages on your home						rage monthly ment
33a.	Copy line 9b here				=>	\$	1,162.00
	Loans on your first two vehicles						
33b.	Copy line 13b here				.=>	\$	380.25
33c.					=>	\$	24.50
33d.	List other secured debts:						
Nam	e of each creditor for other secured debt	Identify property that secures the debt	Doe	es paym			
			incl	ude táxe nsurance			
			incl	ude taxe			
	-NONE-		incl or i	ude taxe nsurance		\$	
	-NONE-		incl or in	ude taxe nsurance No Yes		\$_	
	-NONE-		incl or in	ude taxe nsurance No Yes No		\$_	
	-NONE-		incl or in	ude taxe nsurance No Yes		\$ \$	
	-NONE-		incl or in	ude taxe nsurance No Yes No		· –	
	-NONE-		incl or in	No Yes No Yes		· –	
	-NONE-		incl or in	No Yes No Yes No		\$	

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ebtor 1	Jess	se D Jenki	ns			Cas	se n	number (if known)			
				e 33 secured by you ur support or the su			e,				
	l No.	Go to line	35.								
•	Yes.	listed in lin	e 33, to keep po	must pay to a credito ssession of your prop n the information belo	erty (called the						
Name	e of the	creditor		Identify property that	at secures the d	ebt	T	otal cure amount		onthly mount	
Dite	ch			9913 Foxfair Ho OK 73130 Okla		t y \$	_	16,167.99	÷ 60 = \$		269.47
						\$	_		$\div 60 = \$$ $\div 60 = +\$$		
						Φ	<u>`</u> _		- 00 = +φ Copy		
						Total	\$	269.47	total	\$	269.47
										_	
	Yes.	ongoing pr	iority claims, suc	Il of these priority clai ch as those you listed ue priority claims		lude current or	\$	3,763.55	÷ 60	\$_	62.73
36. P r	ojecte	d monthly	Chapter 13 plar	payment			\$		_		
Ot th To	ffice of e Exec ofind a li	the United S utive Office ist of district n	States Courts (fo for United States nultipliers that inclu	stated on the list issue r districts in Alabama s Trustees (for all othe ides your district, go onli may also be available a	and North Care er districts). ne using the link	olina) or by specified in the	X				
	•			•	it the bankaptey	olone ollico.			Copy tota		
Α۱	verage	monthly adr	ministrative expe	nse				\$	here=>	5	
		of the ded	uctions for deb gh 36.	t payment.						\$	1,898.95
Total	Deduc	tions from	Income								
38. A	dd all c	of the allow	ed deductions.								
				lowed under IRS	\$_	5,133.42	2				
(Copy lir	ne 32, All of	the additional ex	pense deductions	\$_	467.2	4				
(Copy lir	ne 37, <i>All of</i>	the deductions f	or debt payment	+ \$_	1,898.9	5	_			

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Debtor '	1 <u>Jes</u>	se D Jenkiı	ns		c	ase nun	nber (<i>if known</i>)		
Part 2	. De	etermine You	ur Disposable Income Under 11	U.S.C. § 1325	i(b)(2)				
39.			rent monthly income from line 1 Current Monthly Income and Ca			<i>1.</i>		\$	8,095.95
	childrer disability received	 The monthly payments for accordance 	ly necessary income you receively average of any child support part a dependent child, reported in Face with applicable nonbankruptcy anded for such child.	yments, foster Part I of Form 1	care payments, or 122C-1, that you	\$	s0	0.00	
	employe in 11 U.	er withheld from S.C. § 541(b)	etirement deductions. The month of m wages as contributions for qual (7) plus all required repayments of \$\(\). \(\) 362(b)(19).	lified retireme	nt plans, as specifie	d §	s0	0.00	
42.	Total of	all deductio	ons allowed under 11 U.S.C. § 70	07(b)(2)(A). C	opy line 38 here	=> \$	7,499	.61	
	expense their exp	es and you ha enses. You r	al circumstances. If special circulare no reasonable alternative, desmust give your case trustee a detapocumentation for the expenses.	scribe the spec	cial circumstances a	ınd			
Des	scribe th	e special cir	rcumstances		Amount of exp	ense			
					\$				
					\$		_		
					- <u></u>		_		
							_		
				Total \$	0.00		opy ere=> \$ 	0.00	
44.	Total ac	ljustments. /	Add lines 40 through 43.		=>	\$	7,499.61	Copy here=> -\$	7,499.61
45.	Calcula	te your mon	thly disposable income under §	1 325(b)(2). S	Subtract line 44 from	line 3	39.	\$	596.34
Part 3	Ch	ange in Inco	ome or Expenses						
	have chatime you you filed	anged or are Ir case will be I your petition	or expenses. If the income in Forr virtually certain to change after the e open, fill in the information below n, check 122C-1 in the first column in when the increase occurred, ar	e date you file v. For example ı, enter line 2 i	d your bankruptcy p e, if the wages repor n the second colum	etition ted in n, exp	n and during the creased after		
For	m	Line	Reason for change		Date of chang	je	Increase or decrease?	Amount of c	nange
	122C-1 122C-2 122C-1 122C-2 122C-1 122C-2						☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Decrease	\$ \$ \$	
	122C-1 122C-2						☐ Increase ☐ Decrease	\$	

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Debtor 1	Jesse D Jenkins	Case number (if known)	
Part 4:	Sign Below		
	By signing here, under penalty of perjury you declare that	the information on this statement and in any attachments is true and correct.	
Х	/s/ Jesse D Jenkins		
	Jesse D Jenkins Signature of Debtor 1		
Date	May 15, 2017 MM / DD / YYYY		

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Debtor 1 Jesse D Jenkins Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 11/01/2016 to 04/30/2017.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **DOD** Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$71,381.44 from check dated 10/31/2016. Ending Year-to-Date Income: \$87,905.48 from check dated 12/31/2016.

This Year:

Current Year-to-Date Income: \$26,775.59 from check dated 4/30/2017 .

Income for six-month period (Current+(Ending-Starting)): \$43,299.63.

Average Monthly Income: **\$7,216.61**.

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Debtor 1 Jesse D Jenkins Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 11/01/2016 to 04/30/2017.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Midfirst Bank

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$15,069.06 from check dated 10/31/2016. Ending Year-to-Date Income: \$17,401.76 from check dated 12/31/2016.

This Year:

Current Year-to-Date Income: \$5,943.31 from check dated 4/30/2017 .

Income for six-month period (Current+(Ending-Starting)): **\$8,276.01**.

Average Monthly Income: \$1,379.34.

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Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

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Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case: 17-11909 Doc: 1 Filed: 05/16/17 Page: 61 of 62

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Oklahoma

In re	Jesse D Jenkins		Case N).	
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR I	DEBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy.	or agreed to be pa	id to me, for services re	
	For legal services, I have agreed to accept		\$	2,800.00	
	Prior to the filing of this statement I have received		\$	1,400.00	
	Balance Due		\$	1,400.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compe	nsation with any other person	unless they are mo	embers and associates o	f my law firm.
	☐ I have agreed to share the above-disclosed compensat copy of the agreement, together with a list of the nam				aw firm. A
5.	In return for the above-disclosed fee, I have agreed to ren	der legal service for all aspec	ts of the bankrupto	y case, including:	
	a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, states c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou	ment of affairs and plan which is and confirmation hearing, and confirmation hearing, and duce to market value; exists as needed; preparation	n may be required; and any adjourned be mption plannir	earings thereof;	filing of
5.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.			nces, relief from sta	y actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any pankruptcy proceeding.	agreement or arrangement for	payment to me for	r representation of the c	lebtor(s) in
N	lay 15, 2017	/s/ Warren Alarko	on OBA		
L	Date	Warren Alarkon (Signature of Attorne			
		Stevenson-Kim A	•		
		1415 NW 43rd St Oklahoma City, 0	N/ 72110		
		4057027795 Fax			
		warren@alarkon	aw.com; info@	skafirm.com	
		Name of law firm			

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United States Bankruptcy Court Western District of Oklahoma

In re	Jesse D Jenkins	Debtor(s)	Case No. Chapter	13
	VER	RIFICATION OF CREDITOR	MATRIX	
he ab	ove-named Debtor hereby verifie	s that the attached list of creditors is true and o	correct to the best	of his/her knowledge.
Date:	May 15, 2017	/s/ Jesse D Jenkins Jesse D Jenkins		

Signature of Debtor